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CONFIRMATION NO. 8841

SERIAL NUMBER 10/729,076	FILING OR 371(c) DATE 12/05/2003 RULE	CLASS 029	GROUP ART UNIT 3726	ATTORNEY DOCKET NO. 1001.1687101
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APPLICANTS

Peter Skujins, Minneapolis, MN;
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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
03/08/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MN	SHEETS DRAWING 6	TOTAL CLAIMS 53	INDEPENDENT CLAIMS 12
Verified and Acknowledged	<i>J. Skujins</i> Examiner's Signature Initials				

ADDRESS

28075

TITLE

Elongated medical device for intracorporal use

FILING FEE RECEIVED 2138	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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